

Technical Exhibit C-5.3.2.1
“Certificate of Eligibility”

REMINDER

6 August 2002

TO: [REDACTED]
[REDACTED]
ROCKPORT MA 01966

DOB [REDACTED]
SSAN: [REDACTED]
TELEPHONE [REDACTED]

DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY: Paragraph 500102, Department of Defense Financial Management Regulation (Volume 7B)

PURPOSE: To be used for continuing annuity payments.

DISCLOSURE: Disclosure of this information is required. Failure to furnish this certificate will result in suspension of annuity payments. Payments can only restart after receiving satisfactory proof of eligibility.

REQUIREMENT: Each year, during the month of your birth, you must complete a Certificate of Eligibility. You are required to complete and return this form in order to continue receiving your Coast Guard or NOAA annuity. If you are a Coast Guard or NOAA annuitant not currently eligible to receive an annuity, please complete and return this form to us so we can determine if your eligibility has changed. Please call 1-800-772-8724 if you have any questions. Return this form to:

ATTN CLAIMS EXAMINER
COMMANDING OFFICER (RAS)
COAST GUARD HUMAN RESOURCES
SERVICE & INFORMATION CENTER
444 SE QUINCY ST
TOPEKA KS 66683-3591

☐ I am the widow/widower ☐ other _____ of _____ **033208590**
(name of deceased retiree) (SSN)

☐ I have not remarried.

☐ I remarried on _____. If you have remarried and have not sent in a copy of your marriage certificate,
(date) please attach a copy.

I receive compensation from ☐ Social Security Admin. ☐ Dept. of Veterans Affairs ☐ Dept. of Defense

☐ I am ☐ am not receiving a Coast Guard or NOAA annuity at this time.

Annuitant Signature: _____

Date: _____

If form is signed by a Power of Attorney (POA), please enclose a copy of POA, if not already provided. Please sign statement below. NOTE: POA cannot be used if annuitant has been declared incompetent.

I, _____, Attorney-in-Fact of _____, certify
That she/he has not been declared incompetent to manage her/his personal financial affairs, either in competency proceedings in a state court or otherwise in a statement of professional opinion by a physician or psychologist.